



0521924

**DECLARATION  
and  
POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled LIGHTED DISSECTOR AND METHOD FOR USE, the specification of which

☒ is attached hereto.

☐ was filed on \_\_\_\_\_ as  
Application Serial No. \_\_\_\_\_  
and was amended on \_\_\_\_\_.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim U.S. provisional application or foreign priority benefits under Title 35, United States Code, §119 of any U.S. provisional applications or any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior U.S. Provisional or Foreign Application(s)				
			Priority Claimed	
Number	Country	Day/Month/Year Filed	Yes	No

I hereby appoint the Practitioners at Customer Number 26874, c/o Frost Brown Todd LLC as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

The undersigned hereby authorizes the foregoing Practitioners to accept and follow instructions from AtriCure Corporation as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the undersigned and the aforementioned Practitioners. In the event of a change in the firm or persons from whom instructions may be taken, the aforementioned Practitioners will be so notified in writing by the undersigned.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Sole or first inventor:

Signature: Joetta Renee Palmer Date: 7.14.04  
Full Name: Joetta Renee Palmer  
Residence: 3849 Cherry Brook Lane  
Mason, Ohio 45040  
Citizenship: USA  
Postal Address: same as residence

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Second inventor:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Full Name: Dr. Randall Kevin Wolf  
Residence: 6175 Park Road  
Cincinnati, Ohio 45243  
Citizenship: USA  
Postal Address: same as residence

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Third inventor:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Full Name: Dr. Eric William Schneeberger  
Residence: 3445 Mooney Avenue  
Cincinnati, Ohio 45208  
Citizenship: South Africa  
Postal Address: same as residence

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Sole or first inventor:

Signature:	_____	Date:	_____
Full Name:	Joetta Renee Palmer		
Residence:	3849 Cherry Brook Lane		
	Mason, Ohio 45040		
Citizenship:	USA		
Postal Address:	same as residence		

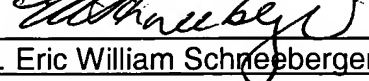
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Second inventor:

Signature:		Date:	8/2/04
Full Name:	Dr. Randall Kevin Wolf		
Residence:	6175 Park Road		
	Cincinnati, Ohio 45243		
Citizenship:	USA		
Postal Address:	same as residence		

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Third inventor:

Signature:		Date:	8/2/04
Full Name:	Dr. Eric William Schneeberger		
Residence:	3445 Mooney Avenue		
	Cincinnati, Ohio 45208		
Citizenship:	South Africa		
Postal Address:	same as residence		

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Fourth inventor:Signature: Date: 7-14-04Full Name: Patrick Jerome AlexanderResidence: 5569 Little Flower AvenueCincinnati, Ohio 45239Citizenship: USAPostal Address: same as residence

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Fifth inventor:Signature: Date: 7/14/04Full Name: Daniel William DivilbissResidence: 16020 Old Mansfield RoadFredericktown, Ohio 43019Citizenship: USAPostal Address: same as residence